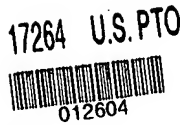


FORM PTO-1082

Mail Stop Patent Application
 COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, VA 22313-1450



Case Docket No. SVL92030117US1
 January 26, 2004
 Express Mail Label No. EL821156773US
 0056.0019

Dear Sir:

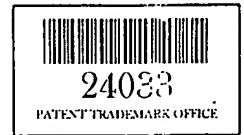
Transmitted herewith for filing is the patent application of

Inventor(s): Reiner Kraft and Andreas Neumann

For: METHOD, SYSTEM, AND PROGRAM FOR HANDLING ANCHOR TEXT

Enclosed are:

- ☒ 6 Sheet(s) of drawings; 17 pages of Application; 11 pages of specification; 1 page of abstract.
☒ Declaration and Power of Attorney (___ unsigned).
 ___ An assignment of the invention to International Business Machines Corporation.
 ___ An associate power of attorney.
 ___ Certified copy of Patent Application No. filed from which priority is claimed under 35 U.S.C. §119.
 ___ IDS; PTO-1449 and ___ references.
☒ Formal Drawings; 6 sheets.
☒ Return Postcard.



CALCULATION OF FEES					
	ITEM	NO. OF CLAIMS FILED MINUS BASE*	NO. OF CLAIMS OVER BASE	X FEE	\$ AMOUNT
A	TOTAL CLAIMS FEE	27 - 20* =	7	X \$18	\$126
B	INDEPENDENT CLAIMS FEE**	3 - 3* =	0	X \$86	\$0
C	SUBTOTAL - ADDITIONAL CLAIMS FEE (ADD FINAL COLUMN IN LINES A + B)				\$ 26
D	MULTIPLE-DEPENDENT CLAIMS FEE SMALL ENTITY FEE = \$140; LARGE ENTITY FEE = \$280				\$0
E	BASIC FEE* SMALL ENTITY FEE = \$370; LARGE ENTITY FEE = \$770				\$ 70
F	TOTAL FILING FEE (ADD TOTALS FOR LINES C, D, AND E)				\$ 96
G	ASSIGNMENT RECORDING FEE				\$ 40
	**LIST INDEPENDENT CLAIMS 1, 10, 19				

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☒ Any filing fees under 37 CFR 1.16 for presentation of extra claims.

Respectfully submitted,

Janaki K. Davda
 Registration No. 40,684

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Express Mail Label No. EL821156773US
SVL920030117US1
0056.0019

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application for
R. Kraft and A. Neumann
Serial No.: Not Yet Assigned
Filed: January 26, 2004
For: **METHOD, SYSTEM, AND
PROGRAM FOR HANDLING ANCHOR
TEXT**

Examiner: Not Yet Assigned

Art Unit: Not Yet Assigned

CERTIFICATE OF MAILING

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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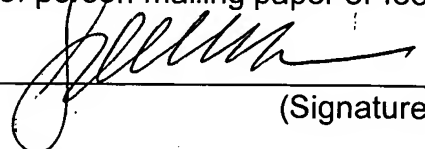
I hereby certify that patent application papers, including specification, claims and 6 sheets of drawings are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. 1.10 on the date indicated above and is addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

January 26, 2004

(Date of Deposit)

Vanessa Sampson Jackson

(Name of person mailing paper or fee)



(Signature)

TRANSMITTAL FORM	Application Number	Not Yet Assigned
<i>(To be used for all correspondence after initial filing)</i>	Filing Date	January 26, 2004
	Inventor	R. Kraft et al.
	Group Art Unit	Not Yet Assigned
	Examiner Name	Not Yet Assigned
Total Number of Pages in this Submission: 7	Attorney Docket Number	SVL920030117US1


ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits /Declarations <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement; ___ references <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an application) <input checked="" type="checkbox"/> Formal Drawings: <u>6</u> sheets <input type="checkbox"/> Licensing-related papers <input type="checkbox"/> Petition: <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, and/or Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ___	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Certificate of Correction <input type="checkbox"/> Fee Address Indication Form <input type="checkbox"/> Other Enclosure(s) (<i>please identify below</i>)
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name:	Janaki K. Davda, Registration No. 40,684
Signature:	<i>Janaki K. Davda</i>
Date:	January 26, 2004
KONRAD RAYNES & VICTOR, LLP 315 South Beverly Drive, Suite 210 Beverly Hills, California 90212 (310) 556-7983	
<input checked="" type="checkbox"/> The Commissioner is authorized to charge any deficiency of fees, or credit any overpayment, to Deposit Account No. 09-0460	

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Typed or Printed name:	Janaki K. Davda	 24033 PATENT TRADEMARK OFFICE
Signature:	<i>Janaki K. Davda</i>	
Date:	January 26, 2004	